

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LOUISIANA PRIORITIES

ADDRESS (number and street) ▼

PO BOX 100072

☐ Check if different than previously reported. (ACC)

ARLINGTON

VA

22201

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00569244

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☒ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

01

01

2015

06

30

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer ADAM SCHAEFFER

Signature of Treasurer

ADAM SCHAEFFER

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

07

31

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LOUISIANA PRIORITIES

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		50.00
(b) Cash on Hand at Beginning of Reporting Period.....	50.00	
(c) Total Receipts (from Line 19)	5416.95	5416.95
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	5466.95	5466.95
7. Total Disbursements (from Line 31)	4750.95	4750.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	716.00	716.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	2295.95	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LOUISIANA PRIORITIES

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4000.00	4000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	4000.00	4000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1416.95	1416.95
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ►	5416.95	5416.95
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ►	5416.95	5416.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	5416.95	5416.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1659.95	1659.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1659.95	1659.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	3091.00	3091.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	3091.00	3091.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4750.95	4750.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4750.95	4750.95

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5416.95	5416.95
34. Total Contribution Refunds (from Line 28(d))	3091.00	3091.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2325.95	2325.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1659.95	1659.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1659.95	1659.95

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 14

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LOUISIANA PRIORITIES

Full Name (Last, First, Middle Initial)

A. ADAM SCHAEFFER

Mailing Address PO BOX 100072

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Evolving Strategies

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		3	0		2	0	1	5		

Transaction ID : SA11AI.4121

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. ADAM SCHAEFFER

Mailing Address PO BOX 100072

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Evolving Strategies

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		0	6		2	0	1	5		

Transaction ID : SA11AI.4122

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

4000.00

TOTAL This Period (last page this line number only)..... ►

4000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 14

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISIANA PRIORITIES

Full Name (Last, First, Middle Initial)

A. ALASKA PRIORITIES

Mailing Address PO BOX 100072

City State Zip Code
 ARLINGTON VA 22201

FEC ID number of contributing
federal political committee.

C C00569277

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1385.05

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11C.4144

Amount of Each Receipt this Period

1385.05

In-kind - Legal and Compliance Services

Full Name (Last, First, Middle Initial)

B. COLORADO PRIORITIES

Mailing Address PO BOX 100072

City State Zip Code
 ARLINGTON VA 22201

FEC ID number of contributing
federal political committee.

C C00569269

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.90

Date of Receipt

06 / 29 / 2015

Transaction ID : SA11C.4146

Amount of Each Receipt this Period

31.90

In-kind - Legal and Compliance Services

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

1416.95

TOTAL This Period (last page this line number only)..... ►

1416.95

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11C

Transaction ID : SA11C.4144

In-kind - Legal and Compliance Services paid to Gober Hilgers PLLC, 1005 Congress Ave, Ste 350, Austin, TX
78701

Form/Schedule: SA11C

Transaction ID: SA11C.4146

In-kind - Legal and Compliance Services paid to Gober Hilgers PLLC, 1005 Congress Ave, Ste 350, Austin, TX
78701

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LOUISIANA PRIORITIES

Full Name (Last, First, Middle Initial)

A. Gober Hilgers PLLCMailing Address 1005 Congress Ave
Ste 350

City Austin State TX Zip Code 78701

Purpose of Disbursement
Legal and Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 30 2015**Transaction ID : SB21B.4137**

Amount of Each Disbursement this Period

1206.95

Full Name (Last, First, Middle Initial)

B. Gober Hilgers PLLCMailing Address 1005 Congress Ave
Ste 350

City Austin State TX Zip Code 78701

Purpose of Disbursement
Legal and Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 30 2015**Transaction ID : SB21B.4138**

Amount of Each Disbursement this Period

17.50

Full Name (Last, First, Middle Initial)

C. Gober Hilgers PLLCMailing Address 1005 Congress Ave
Ste 350

City Austin State TX Zip Code 78701

Purpose of Disbursement
In-kind - Legal and Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 30 2015**Transaction ID : SB21B.4141**

Amount of Each Disbursement this Period

160.60

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1385.05

1385.05

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.4137

In-kind - Legal and Compliance Services from Alaska Priorities

Form/Schedule: SB21B

Transaction ID: SB21B.4138

In-kind - Legal and Compliance Services from Alaska Priorities

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.4141

In-kind - Legal and Compliance Services from Alaska Priorities

Form/Schedule:

Transaction ID:

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
LOUISIANA PRIORITIES

A. ADAM SCHAEFFER

Mailing Address PO BOX 100072

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement	Refund of Contribution
<p>1. Operating Expenses: The primary purpose of the disbursement is to cover the day-to-day costs of running the organization, such as salaries, rent, utilities, and materials. These expenses are necessary for the organization to fulfill its mission and provide services to its members.</p> <p>2. Capital Expenses: Disbursements may be used to purchase or lease long-term assets, such as buildings, equipment, or vehicles, which are essential for the organization's operations.</p> <p>3. Program Expenses: Funds may be allocated to specific programs or projects that align with the organization's goals, such as community outreach, research, or advocacy efforts.</p> <p>4. Administrative Expenses: Disbursements cover the costs of managing the organization, including office supplies, legal fees, and insurance.</p>	<p>1. Excess Funds: If the organization has surplus funds at the end of a fiscal year, these may be refunded to the contributors, typically in the form of a check or direct deposit.</p> <p>2. Overpayment: In the event of a clerical error or miscommunication, a disbursement may be made in excess of the amount owed, resulting in a refund to the contributor.</p> <p>3. Change of Purpose: If the original purpose for the disbursement changes or the contributor decides to withdraw their contribution, a refund may be issued.</p> <p>4. Termination: In the case of an organization's dissolution or termination, any remaining funds may be refunded to the contributors.</p>

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB28A.4133

Amount of Each Disbursement this Period

3091.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3091.00

3091.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 OF 14

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LOUISIANA PRIORITIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Evolving StrategiesNature of Debt (Purpose):
Voter Phone Banks

Mailing Address 3125 1st Pl. N.

City State

Zip Code

Arlington

VA

22201

Outstanding Balance Beginning This Period

2378.72

Transaction ID : SD10.4103

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2068.45

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gober Hilgers PLLCNature of Debt (Purpose):
Legal and Compliance Services

Mailing Address 1005 Congress Ave

Ste 350

City State

Zip Code

Austin

TX

78701

Outstanding Balance Beginning This Period

1276.95

Transaction ID : SD10.4117

Amount Incurred This Period

0.00

Payment This Period

1276.95

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gober Hilgers PLLCNature of Debt (Purpose):
Legal and Compliance Services

Mailing Address 1005 Congress Ave

Ste 350

City

State

Zip Code

Austin

TX

78701

Outstanding Balance Beginning This Period

17.50

Transaction ID : SD10.4119

Amount Incurred This Period

0.00

Payment This Period

17.50

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

2068.45

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 14 OF 14

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LOUISIANA PRIORITIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address 1005 Congress Ave
Ste 350City State Zip Code
Austin TX 78701

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4140

Amount Incurred This Period

420.00

Payment This Period

192.50

Outstanding Balance at Close of This Period

227.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

227.50

2) **TOTALS** This Period (last page this line number only)..... ►

2295.95

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

2295.95